

ART B—ISSUE FEE TRANSMITTAL

242-645
561 30

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1. CORRESPONDENCE ADDRESS 12M1/1112

ARTHUR L PLEVY
146 ROUTE 1 NORTH
P O BOX 1366
EDISON NJ 08818-1366

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

☐ Check if additional changes are enclosed

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APPLICATION NO.	FLING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/696,104	08/13/96	020	ALEXANDER, L.	11/12/96
First Named Applicant	SOLAZZI, MONTE J.			

TITLE OF INVENTION APPARATUS FOR TRIMLESS SAMPLE CUP USED IN X-RAY SPECTROSCOPY (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1	CHEMPLEX3C/F	422-102.000	G30	UTILITY	YES	\$645.00 02/12/97

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 PLEVY & ASSOCIATES

2

3

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:
CHEMPLEX INDUSTRIES, INC.

(2) ADDRESS: (CITY & STATE OR COUNTRY)
STUART, FLORIDA 34997

6a. The following fees are enclosed:

☒ Issue Fee ☒ Advance Order - # of Copies 10

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

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NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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810 BL 01/30/97 08696104
1 242 645.00 CK
1 561 30.00 CK

on: January 14, 1997

(Date)

Colleen Maroney

(Name of person making deposit)

Colleen Maroney
January 14, 1997

(Signature)

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1. TRANSMIT THIS FORM WITH FEE